

Department of Administration DIVISION OF TAXATION 289 Promenade Street Providence, R. I. 02908

APPLICATION FOR EXPORT PERMIT CERTIFICATE

Application is hereby made for registration as an Exporter of Motor Fuels from the State of Rhode Island, in accordance with the provisions of Chapter 36 of Title 31, General Laws, 1956, as amended.

1.	Name of Applicant (name			
			is to be issued)	
2.	Address of Home Office (Street & Number) (City or Town) (State)			
3.	State if Individual or Partnership			
4.	Give name(s) and address(es) of each owner			
5.	If corporation, give name of State in which incorporated			
6.	If corporation, give names and addresses of following officers:			
Of:	ficers	Name	Address	
President				
Vice-President				
	etary			
Treasurer				
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7.	Distribution area covered in your contract with supplier			
8.	Type of motor fuel to be handled			
9.	Estimate of anticipated average monthly gallonage to be exported			
The undersigned hereby certifies that the information given on this form is true, correct and complete to the best of his knowledge and belief.				
Date_	te19Name of Applicant			
	ByOfficial Position			